

SEE SAM SECTION 6230, ET SEQ. FOR INSTRUCTIONS--to fill out form online, click in Department Name field.

DEPARIMENT NAME	FUND			DOCUN	IENT NUMBER
				FISCAL	YEAR
			INCREA	REASE (+) OR DECREASE (-)	
SOURCE OF FUNDS		AMOUNTS AVAILABLE	REVISION REQUES	STED	REVISION APPROVED (DEPT. OF FINANCE USE ONLY)
APPROPRIATION (List adjustments in detail):					
TOTAL (Must equal the N	NET				
APPROPRIATIONS TOT	AL below)				
UNSCHEDULED APPROPRIATIONS:					
LIST OF PROGRAMS, CATEGORIES OR PROJECTS IN SCHEDULED APPROPRIATION:					
NET APPROPRIATION					_
PURPOSE OF REVISION (List in detail, including workload, fiscal history	ry on capit	al outlay, and cross-ref	erence supporting an	d relate	d documents.)

(for additional space, see reverse)

REQUESTED BY		RECOMMENDED BY (Department)	artment)	APPROVED BY (Dept. of Finance)		
NAME		NAME		NAME		
TITLE	DATE	TITLE	DATE	TITLE	DATE	

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	4440411170	INCREASE (+) OR DECREASE (-)		
BUDGET ALLOTMENT TITLES	AMOUNTS AVAILABLE	REQUESTED	APPROVED (DEPT. OF FINANCE USE ONLY)	
NALLOTTED BALANCES:				
PERSONAL SERVICES OPERATING EXPENSES AND EQUIPMENT				
TC	DTALS			
PURPOSE OF REVISION (Con'td):	TALO			

PURPOSE OF REVISION (Con'td):